

44453
EAST SUFFOLK COUNTY COUNCIL




ANNUAL REPORT

OF THE

County Medical Officer

1941

PUBLIC HEALTH DEPARTMENT,
COUNTY HALL,
IPSWICH



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PUBLIC HEALTH DEPARTMENT,

COUNTY HALL,

IPSWICH.

August, 1942.

To the Chairman and Members of the County Council.

MY LORDS, LADIES AND GENTLEMEN,

I have the honour to present my Annual Report for 1941; this is, as for the last two years, on the instructions of the Ministry of Health, restricted both in matter and dimensions.

I have the honour to be,

Your obedient Servant,

B. WOOD-WHITE,

County Medical Officer.

GENERAL STATISTICS.

Area : 548,607 acres.—1st April, 1934.

Population 1941 : 179,400.

(As estimated by the Registrar-General).

Population, Census 1931 : 207,475.

Number of inhabited houses, Census 1931 : 52,513.

Number of families or separate occupiers, Census 1931 : 53,933.

Rateable Value : £1,028,686 (year commencing 1st April, 1941).

Sum represented by a penny rate : £3,525 (estimated). Year commencing 1st April, 1941.

Natural and Social Conditions of the Area.

Geology, Industry, Commerce. These subjects are dealt with in the Survey Report for 1930 and there has been no alteration requiring comment; those desiring information are referred to that Report.

1941

Extracts from Vital Statistics for the Year.

<i>Live Births :</i>	<i>M.</i>	<i>F.</i>	<i>Total.</i>	} Birth rate per 1,000 of estimated population :— 15.75.
Legitimate	1,337	1,337	2,674	
Illegitimate	112	87	199	
<i>Stillbirths :</i>				} Rate per 1,000 total (live and still) births :— 26.1.
Legitimate	42	28	70	
Illegitimate	5	2	7	
<i>Deaths :</i>				} Crude death rate per 1,000 of estimated popu- lation :—13.87.
	1,267	1,221	2,488	

<i>Deaths from Puerperal Causes :</i>	No. of Deaths.	Rate per 1,000 total births.
Puerperal Sepsis	—	—
Other Puerperal Causes	3	1.02
Total	3	1.02

Death Rate of Infants under one year of age :

All Infants per 1,000 live births	45.95
Legitimate Infants per 1,000 legitimate live births	44.51
Illegitimate Infants per 1,000 illegitimate live births	65.33

Deaths from Measles (all ages)	4
„ Whooping Cough (all ages)	7
„ Diarrhoea (under 2 years of age)	7
„ Cancer (all ages)	384

Cancer Death Rate per 1,000 population	2.14
Tuberculosis Death Rate per 1,000 population ....	.48

Population.

Year.	Population.
1931 ...	207,475 Census return.
1940 ...	199,500 for calculating births and deaths.
1941 ...	179,400 for calculating births and deaths.

The civil population of the County has again decreased; this is likely to continue while persons transfer from the civilian to the military sphere. No correction has been given this year for calculating deaths.

TABLE I.

BIRTHS.

(Still Births are excluded).

Year.	Total.	Birth Rate per 1,000 Population.			
		Urban.	Rural.	Administra- tive County.	England and Wales.
1940	2789	14.4	13.7	14.0	14.6
1941	2873	17.04	15.0	15.8	14.2

The birth rate is higher this year than it has been since 1930, when it was 16.2. A special number of births is given for calculating the birth rate, which is less than the real number of births given for calculating the infant mortality rate.

TABLE II.

ILLEGITIMATE BIRTHS.

(Still Births are excluded).

Year.	Total.	Birth Rate per 1,000 Population.			
		Urban.	Rural.	Administra- tive County.	England and Wales.
1940	142	0.6	0.8	0.7	—
1941	199	1.1	1.1	1.1	—

This rate of 1.1 is much in excess of that of 1940 and is almost double that of 1939. It is natural for a number of reasons for the illegitimate rate to rise. This was the experience of the last war and 1941 can be compared with 1916, when the rate had risen to 1.5.

TABLE III.
DEATHS.

Year.	Total.	Death Rate per 1,000 Population.				Administra- tive County Corrected Death Rate.
		Urban.	Rural.	Administra- tive County.	England and Wales.	
1940	2824	15.2	13.4	14.16	14.3	12.45
1941	2488	15.4	13.0	13.87	12.9	—

The crude death rate has fallen slightly, but it is still higher than usual. As no factor has been given this year the corrected death rate is not available. A higher crude rate is to be expected because a large number of young people have entered the Services and left the County, leaving a population for calculating the rate decreased by the emigration of the young, while the old remain, and as it is the old who die the number at risk has changed little.

TABLE IV.

Quinquennium.	Number of Deaths.	Number of Births.	Excess of Births over Deaths.
1927-31	12,353	16,553	4,200
1932-36	12,731	14,701	1,970
1937-41	13,165	14,391	1,226

A comparison of this table with the one in my last report reveals that the excess of births over deaths is higher for the period 1937-41 than in the period 1936-40—1,226 compared with 1,145. This suggests that the brake is being applied slightly to what has for some time been a continuous slide towards equality in the numbers of births and deaths.

Infant Mortality Rate.

TABLE V.
DEATHS OF CHILDREN UNDER ONE YEAR.

Year.	Total.	Rate per 1,000 Live Births.			
		Urban.	Rural.	Administra- tive County.	England and Wales.
1940	128	45	47	46	55
1941	132	47	45	46	59

There is no change in the infant mortality rate this year; it is a little on the high side for the County, it has only been exceeded once in the last 10 years and equalled twice. Lowestoft, with a rate of 53.6, pushes up the County rate a little from 44.7 to 46.0.

TABLE VI.
INFANT MORTALITY OVER FIVE-YEARLY PERIODS.

Quinquennium.	Number of Births.	Number of Deaths.	Infant Mortality Rate.
1927-1931	16,553	832	50.3
1932-1936	14,701	628	42.7
1937-1941	14,391	634	44.1

For the first time this table does not show an improvement in each successive quinquennium, for the most recent five-yearly period shows a higher rate than its predecessor. It is possible that a stage has arrived when further improvement of note is unlikely.

II.

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.

STAFF.

Medical Staff (whole-time):

County Medical Officer: B. Wood-White.

Deputy County Medical Officer: A. G. Atkinson.

County Bacteriologist: (Acting) P. H. Martin.

Assistant County Medical Officers: H. Pedler, C. M. Burns, C. M. Whiteford, E. A. Parkinson, E. Graham (joined the services), M. Gibson (temporary).

Nursing Staff (whole-time):

Supervisor of Midwives: F. MacDonald.

Assistant Supervisor of Midwives: D. Woolston.

1 Orthopaedic Nurse and 2 Health Visitors.

County Sanitary Staff (whole-time):

County Sanitary Officer: A. E. Chapman.

Assistant County Sanitary Officers: G. H. Hine

Ivon W. Fenn (on Service).

Chief Clerk: A. Knight.

District Medical Officers of Health:

Urban Districts:

Aldeburgh	...	...	C. D. Somers.
Beccles	...	...	L. Gibson.
Bungay	...	...	H. Pedler.
Eye ...	...	...	H. Pedler.
Felixstowe	...	...	G. J. Conford.
Halesworth	...	...	W. M. Burns.
Leiston	...	...	W. M. Burns.
Lowestoft	...	...	V. R. Walker.
Saxmundham	...	...	D. W. Ryder Richardson.
Southwold	...	...	J. Borham for D. W. Collings.
Stowmarket	...	...	H. Pedler for E. Graham.
Woodbridge	...	...	C. Whiteford.

Rural Districts:

Blyth ...	...	...	W. M. Burns.
Deben	...	...	C. Whiteford.
Gipping	...	...	C. Whiteford for E. Graham.
Hartismere	...	...	H. Pedler.
Lothingland	...	...	L. Gibson.
Samford	...	...	A. G. Atkinson for E. Graham.
Wainford	...	...	H. Pedler.

Dr. Graham, with the consent of the Council, volunteered for the Services; he has held a commission as a Medical Officer with the R.A.F. since the autumn. Dr. M. Gibson was, therefore, appointed temporarily and she has taken over a large proportion of maternity and child welfare and

school work; this relieved Dr. Atkinson from County duties for Dr. Graham's public health duties for Samford R.D.C., Dr. Whiteford for Gipping R.D.C. and Dr. Pedler for Stowmarket U.D.C.

I gladly record that Ivon W. Fenn, Assistant County Sanitary Inspector, who joined the Forces in October, 1939, is now a Staff Sergeant in the R.A.M.C. He has been serving in the Middle East since the beginning of 1941.

County Laboratory.

The number of specimens examined at the County Laboratory for the past three years were:—

1939	...	...	...	7,416
1940	...	...	...	11,220
1941	...	...	...	10,732

III.

MATERNITY AND CHILD WELFARE.

This part of the Report deals with the Administrative County, excluding Lowestoft, which is a Local Supervising Authority and an Authority for Maternity and Child Welfare purposes.

Summary of Visits Paid by Health Visiting Staff.

		1941.	1940.
First visits to children under 1 year	...	2,108	2,005
Re-visits to infants under 1 year	...	15,675	14,850
Visits to expectant mothers	...	9,955	8,542
Visits to children 1-5 years	...	26,470	25,573
Totals	...	54,208	50,970

Nursing in the Home.

There are 64 District Nursing Associations; 72 Nurses are employed by the District Nursing Associations and 6 Emergency Nurses by the East Suffolk County Nursing Association—a total of 78, 45 of whom use a car for work.

The categories of Nurses undertaking work for the County Council at the end of the year:—

			Emergency Nurses.
Queen's Nurses	...	17	1
Trained Nurses	...	14	—
District Nurses	...	38	3
Vacancies	...	3	2
Total	...	72	6

It becomes increasingly difficult for Miss MacDonald to fill posts as they become vacant.

MATERNITY AND CHILD WELFARE CENTRES.

Summary for years 1940 and 1941:—				1941.	1940.
Number of openings	...	...	...	692	663
Number of attendances:—					
Ante-natal	...	...	...	1,225	964
Post-natal	...	...	...	13	17
Children	...	...	...	16,568	16,403
Average attendance of children a session				23.9	24.7
Number of consultations with Medical Officer:—					
Mothers, Ante-natal	...	...	...	1,155	835
Mothers, Post-natal	...	...	...	12	15
Children	...	...	...	5,970	6,545
Average number of consultations per child each session attended by Medical Officer				10.9	11.7

Twenty-two Infant Welfare Centres were in commission during the year. Eight were equipped as ante-natal centres. Special ante-natal clinics were held at Felixstowe and Stowmarket. One new clinic was established at Otley in 1941.

The number of post-natal attendances and consultations with Medical Officers is unwarrantably small. It is strange that mothers who willingly accept ante-natal care, with the examinations it entails, fail to accept post natal care which is of great importance to them. The word propaganda has an ugly sound (I prefer advertisement)—this should be applied to post-natal care as it has been to ante-natal. I feel that perhaps Medical Officers of Clinics do not give sufficient information to mothers about the correctible evils which so often follow child-birth.

Institutional Provision for Maternity Cases.

One hundred and seventy-five women were confined in institutions under the Council's scheme, compared with 71 in 1940. This increase is caused by war conditions which produces a movement of population with people living in lodgings away from home.

Unmarried mothers.—The County Council contributed towards four cases under their agreement with the Diocesan Moral Welfare Association.

Obstetric Consultant Service.

The Obstetric Consultants were called upon seven times during the year. I have never been able to discover why this service is almost neglected by the Practitioners of the County.

Home Helps.

Home helps were provided upon six occasions.

Dental Treatment for Expectant Mothers.

Ten cases required financial assistance for extractions, fillings, scalings, dentures, etc.

Maternal Mortality.

There were no deaths from Puerperal Sepsis and 3 from other Puerperal causes. The County mortality rate for each 1,000 births was 1.02, compared with 2.23 for England and Wales. Last year the rate for the County was 3.12 and the rate for England and Wales 3.34.

There were no deaths from Puerperal Sepsis in 1941; this, as far as I can ascertain, has never happened before. There were three deaths from

other causes so that the whole puerperal mortality rate for total births was 1.02 a 1,000 and for live births, 1.03. The smallest number of deaths recorded before is 7, and the lowest rate 2.25. The numbers dealt with are so small that the figures of any particular year are of little significance and good or bad luck affects them materially. I think, however, that for comparative purposes the figures for five-yearly periods are of some value and this year I give the maternal mortality rate for the three last quinquenniums:—

<i>Five-yearly period.</i>	<i>Mortality rate per 1,000 live births.</i>	
	<i>Administrative County.</i>	<i>England and Wales.</i>
1927-31 	4.0	4.2
1932-36 	3.4	4.2
1937-41 	2.4	2.9

These figures show that the improvement in the County has been more marked than the improvement in England and Wales, although the quinquennium 1927-31 gives an almost identical rate.

Ophthalmia Neonatorum.

Eighteen cases were notified (including one case removed from Derby). Fourteen were treated at home and 4 in hospital. In all cases the vision was unimpaired. This year the number of cases notified is large; in 1940 seven cases were notified and in 1939, six.

Puerperal Pyrexia.

Thirty-three cases were notified; of these, 17 were treated at home, 16 in hospitals through arrangements by the County Council. The number of cases notified was again between 30 and 40, but for the first time no death occurred.

Midwives.

On hundred and sixteen midwives practised in the County during the year. There were 2,367 births, excluding Lowestoft, in the area and of these the midwives attended 1,099 as midwives and 1,056 as maternity nurses, a total of 2,155.

The midwives have taken more cases as midwives than they have as maternity nurses, reverting to the happenings of the period before 1936; from 1936 to 1940 the midwives acted as maternity nurses more often than as midwives. For the first time since 1930 has the total number of cases dealt with by the nurses as midwives and maternity nurses exceeded 2,000—91 per cent. of the total births in the area under consideration.

Registration of Nursing Homes.

Twelve Homes were on the register as maternity or nursing homes during the year. Four hospitals and 2 nursing homes were exempted.

Orthopaedic Treatment.

Twenty-two cases required financial assistance as in-patients and out-patients, etc.

Child Life Protection.

The number of children under supervision at the end of the year was 289, compared with 337 in 1940.

From time to time I have come across an instance where a foster child is taken for reward in a household where one of the members is suffering from

open Pulmonary Tuberculosis, or where a foster child is already in a household in which a member develops the condition. The information I have about the patient as Tuberculosis Officer is confidential and cannot be disclosed by me in my capacity as Infant Life Protection Officer. It is essential to protect the child from infection and an impossible position at once arises, various subterfuges have to be employed in an endeavour to cope with the situation.

When the law is amended I suggest that a clause should be inserted requiring:—

- (1) A declaration to be made to the Infant Life Protection Authority before a child is accepted into a household that there is no person living in it who suffers from Pulmonary Tuberculosis.
- (2) That if at any time anyone in the house is known to have developed Pulmonary Tuberculosis the Infant Life Protection Authority must be notified forthwith.

The foster child has the right to be protected from this grave danger.

IV.

VACCINATION.

	<i>Adminis. County.</i> <i>County.</i>		<i>Excluding</i> <i>Lowestoft.</i>
	1939.	1940	1940.
Total births registered during year ...	2,707	2,602	2,069
Successfully vaccinated ...	937	990	969
Insusceptible of vaccination ...	8	29	28
Statutory declaration of conscientious objection ...	1,467	1,245	878
Died unvaccinated ...	83	67	48
Postponement by medical certificate	10	8	7
Removal to other districts and Vaccination Officer apprised ...	41	39	30
Removal to places unknown and cases not found ...	71	47	37
Percentage of children successfully vaccinated ...	34.6	38.4	46.8

The percentage of successfully vaccinated children in 1940 was 38.4 compared with 34.6 in 1939. The percentage for the County, excluding Lowestoft, was 46.8.

For the first time since vaccination was taken over by the County Council some ten years ago, the figures show an increase in the percentage of children vaccinated. Although there were 100 fewer births there were 50 more vaccinations and 200 fewer conscientious objections.

V.

SANITARY CIRCUMSTANCES OF THE AREA.

Water Supplies.

There is nothing to report under this heading for 1941.

Sewage Disposal.

There is nothing to report under this heading for 1941.

HOUSING (RURAL WORKERS) ACTS.

TABLE VII.

Progress of Scheme approved by the Minister of Health under the Housing (Rural Workers) Acts, 1926 and 1938.

Position at 31st December, 1941.

ASSISTANCE BY WAY OF GRANTS BY THE COUNCIL.

Purpose for which assistance required. (1)	Number of dwellings in respect of which applications for grants have been :—			Assistance promised by the Council :—		Assistance given by the Council :—		Number of dwellings :—	
	Made to the Council. (2)	Refused by the Council. (3)	Withdrawn by applicants. (4)	Total Amounts of grants promised. (5)	Number of dwellings concerned. (6)	Total Amounts of grants paid. (7)	Number of dwellings concerned. (8)	On which work has been finished. (9)	On which work has been commenced but not finished. (10)
(i) Conversion of buildings not previously used as dwellings into dwellings ...	49	6	14	£ s. d. 2,808. 4. 0	29	2,808. 4. 0	29	29	—
(ii) Improvement of existing dwellings ...	1,246	120	195	72,848. 19. 8	931	72,048. 19. 8	923	923	1
Total at end of year ...	1,295	126	209	75,657. 3. 8	960	74,857. 3. 8	952	952	1

Like most housing work this has almost ceased, and even less has been done under this Act than in 1940 ; less than £50 was promised by the Council in grants during the year.

VII.

INSPECTION AND SUPERVISION OF FOOD.

Milk.

Thirteen samples of milk were taken and examined for tubercle bacilli; one was found to be positive, roughly 8 per cent.

Seven investigations of herds were carried out by the Veterinary Inspector of the Ministry of Health. Four were unsuccessful in tracing the responsible cows. In one case there was the possibility of another herd being involved, but when this was discovered it was too late to take any action. In another case a group sample was found on examination to be positive; when the Veterinary Surgeon visited again, one cow in the group had been disposed of for slaughter and there was no proof that it had infected the milk. The third case was considered successful as one cow in milk at the time of the original positive sample had been disposed of to a knacker yard and slaughtered before the investigation took place and the knacker reported the carcase as tuberculous.

Milk (Special Designations) Order.

Accredited Milk.—The number of licences in force at the end of the year was 277. Seven licences were suspended and 4 suspensions were revoked.

764 samples of milk were collected and examined. 202 were found to be unsatisfactory, a percentage of 26.4 compared with 32.8 in 1940.

Tuberculin Tested.—Twenty-seven licences were in force at the end of 1941; there were no suspensions during the year. 69 samples were taken, 18 were found to be unsatisfactory, a percentage of 26.1.

Food and Drugs Act, 1938.

234 samples of food and drugs were taken for analysis by the Public Analyst; of these, 9 were found to be adulterated and 15 otherwise unsatisfactory. Legal proceedings were taken in 5 cases:—

1. Added water in milk ... Defendant fined £5.
2. Milk deficient in fat ... Defendant fined 5/- and 5/- costs.
3. Milk deficient in fat ... Defendant fined 5/- and 5/- costs.
4. Added water in milk ... Case dismissed.
5. Added water in milk ... Defendant fined £1 and costs.

A Local Authority whose duty it is to take action against offenders must, in my experience, expect disappointment. It is worth while recording the circumstances of a prosecution taken in the County under these Acts.

A defendant was charged with selling milk with water added in the following amounts:—6 churns contained, respectively—7, 8.7, 6.5, 9.5, 11.4 and 3.5 per cent.

The defendant pleaded guilty and admitted that his bulk delivery was reduced after this sampling by five gallons a day, so that it was likely that the public were defrauded for a considerable period and were buying water instead of milk. The cost to the County Council for sampling, solicitors' fees, etc., was nearly £16, and this does not include the time which the officers spent in investigating and sampling. The Court convicted and imposed a fine of £1 only.

It is significant that at the same Court a person who inadvertently showed a light was fined £2 for this offence.

The way in which the Court dealt with this offender appears to be a stimulant rather than a deterrent to fraud.

VIII.

SHOPS ACTS, 1912-36.

Forty-four primary inspections were made; 7 special visits and one evening and one day survey. 91 visits were made in connection with an application for a Closing Order for Hairdressers and Barber's Shops.

IX.

PREVALENCE AND CONTROL OF INFECTIOUS AND OTHER DISEASES.

Isolation Hospital Accommodation.

(See Report for 1938).

INFECTIOUS DISEASES, 1941.

TABLE VIII.

Infectious Disease:	Number of cases notified.	Number of deaths.	Attack rate per 1,000 Population.		Mortality rate (per cent.)
			Adminis- trative County.	England and Wales.	
Smallpox	—	—	—	—	—
Scarlet Fever	240	1	1.34	1.47	0.4
Diphtheria	34	—	.19	1.25	—
Enteric Fever	17	—	.09	.12	—
Puerperal Pyrexia	39	—	.22	.48	—
Pneumonia	196	75	1.09	1.25	38.0
Encephalitis Lethargica	—	4	—	—	Unknown
Poliomyelitis	9	3	.05	Not given	33.3
Whooping Cough	1020	7	5.69	4.39	.68
Measles	3780	4	21.07	10.33	.1

Scarlet Fever.—The number of cases of this disease and the attack rate have been fairly constant for the past three years; the one death this year has been the only death in the three years. One death in nearly 1,000 cases—Scarlet Fever has certainly lost its killing power.

Diphtheria.—The attack rate for Diphtheria is, as usual, remarkably low and is only one-sixth of the attack rate for the country. It is gratifying that no deaths occurred amongst the 34 cases notified.

Enteric Fever.—18 cases notified in 1939 and 7 in 1940, with one death in each year. No death amongst 17 cases this year is fortunate.

Poliomyelitis.—A small outbreak of poliomyelitis occurred in March, 1941, at the Eagles Nest Foster Home. This Home has 24 beds and caters for young children, and had been evacuated from London to Haughley.

The first patient was a child of nine months; the symptoms appeared on the 17th March, and the child died within 20 hours (18.3.41); she probably had a respiratory paralysis. The second was a baby of five months old; he was not well on the 17th, later he had a rigor and developed a squint; he became unconscious three days later and died in hospital six days after the onset of symptoms. The third case was a child of three years old; she was a

little off colour for a day and recovered the next day; on the 18th she was breathless at night and the following day developed head retraction and was unable to swallow; she died in the Isolation Hospital two days later after the real symptoms had developed.

The Pathologist reported on the third case, that in view of the clinical history and post-mortem findings, death was probably due to poli-encephalitis. The Bacteriologist stated that the examination of cerebro-spinal fluid showed the findings to be compatible with this diagnosis.

The Ministry of Health felt that there was a possibility of a virus infection other than poliomyelitis, and Dr. Beeston, who had come to England with the Harvard Infectious Disease Unit, investigated the outbreak. A further case was considered to be an abortive one; slight illness beginning on the 21st March. Not all were agreed about this case. Finally, on the 4th April, a child of 2½ months had a rigor followed by twitching of the face and raised temperature. On the 6th April the child had a loss of power of the limbs on the left side, particularly of the fore-arm; on the 7th she had complete paralysis of the left arm and left leg, and partial paralysis of the left thigh. There was no doubt that the child suffered from poliomyelitis and this established the cause of the small outbreak with such a very high mortality. Out of five probable cases, three died—60 per cent.

Whooping Cough.—This was prevalent in the County during 1941—the attack rate was high, but the mortality rate low.

Measles.—The attack rate for measles is greater than that for the country, but measles comes in waves and 1941 was the crest for the county.

X.

TUBERCULOSIS.

TABLE IX.

Cases certified as having died of Tuberculosis. Figures furnished by the Registrar-General.

Year.	Pulmonary.	Non-Pulmonary.	Total.
1939	79	16	95
1940	82	13	95
1941	66	21	87

The number of persons dying from tuberculosis is less than it has been on any occasion, save in 1938, when obviously a freak figure cropped up and was influenced by an extremely low number of deaths from non-pulmonary tuberculosis. This year the deaths from non-pulmonary tuberculosis are higher than they have been for the last three years, but the pulmonary deaths are less than ever before. The population of the County has decreased by the enlistment of men and women in the Services, but though the rate is calculated upon the present population, the number of cases dying in the County from pulmonary tuberculosis is not likely to be much affected, because members of the Services contracting the disease are discharged and usually return; if they die, they do so at home.

In these circumstances I think it is right to assume that although it is the common experience for tuberculosis to increase during war, this year there is really an improvement, though the death rate actually remains the same as it was in 1940.

Deaths from Tuberculosis.

TABLE X.

Figures furnished by the Registrar-General.

Five-yearly Period.	Deaths from Pulmonary Tuberculosis.	Deaths from Non-Pulmonary Tuberculosis.	Total.
1927-1931	622	149	771
1932-1936	512	120	632
1937-1941	384	79	463

This table is the most reliable guide to the decrease in Tuberculosis which has occurred in the County during the last fifteen years—it reveals a remarkable decline in this deadly and disastrous disease.

Death Rates—Tuberculosis.

TABLE XI.

Year.	All Forms.		Pulmonary.		Non-Pulmonary.	
	Adminis- trative County.	England and Wales.	Adminis- trative County.	England and Wales.	Adminis- trative County.	England and Wales.
1939	.45	.64	.38	.54	.07	.10
1940	.48	.68	.41	.57	.07	.11
1941	.48	.69	.37	.57	.12	.12

The death rate is the same as it was in 1940 and higher than in 1938 and 1939, but lower than in all years before.

	<i>Tuberculosis (All Forms).</i>
Official County Rate ... ..	.48
Rate with immigrants excluded ...	.47
Rate with immigrants and deaths from other causes excluded ... ..	.46

This year there is almost no difference between the official rate and the rate with exclusions. It is not likely that patients suffering from Pulmonary Tuberculosis will emigrate from other areas to this County as they did in times of peace—they realise there are other areas which appear to be healthier.

Deaths of notified cases of Tuberculosis during 1941.

Notified after death	4
Within one week of notification ...	9
1 week to 1 year after notification ...	30
1 year to 5 years after notification ...	20
From 5 years onwards after notification ...	7
Total	70

968 examinations were made by the Tuberculosis Officers during 1941; compared with 1,034 in 1940. 190 cases were on full time, 87 part-time work; 136 were able to be about and 67 were confined to bed.

396 specimens of sputum were examined, 135 being positive.

245 pulmonary and 75 non-pulmonary cases were removed from the register during the year.

Primary Notifications.—123 pulmonary cases and 60 non-pulmonary, a total of 183 for the year. There was an increase of 12 pulmonary

notifications and 8 non-pulmonary; from this, there is a suggestion that there has been an increase of Tuberculosis.

Artificial Pneumothorax Treatment.—8 new cases had this treatment. Five completed treatment; 3 had advanced disease and treatment ceased. 25 patients were continuing treatment at the end of the year. 8 patients entered the County requiring refills and 9 others left to continue treatment elsewhere.

Institutional Treatment.

Pulmonary Tuberculosis.—69 patients were admitted to institutions. 40 were discharged; 19 died; 42 remained in the institutions at the end of 1941.

Non-Pulmonary Tuberculosis.—57 cases were admitted to institutions; 50 were discharged; 1 died. 22 patients remained in the institutions at the end of 1941.

Number of patients receiving residential treatment:—

		1939.	1940.	1941.
Pulmonary	...	120	100	93
Non-Pulmonary	...	68	52	55
		—	—	—
Total	...	188	152	148
		—	—	—

TABLE XII.

1.	No. of cases on Dispensary Register, 1st January, 1941	...	469
2.	No. of cases transferred <i>from</i> other areas and cases returned after discharge under (3) below in previous years	...	34
3.	No. of cases transferred <i>to</i> other areas, not desiring further assistance under the tuberculosis scheme and cases "lost sight of"	...	58
4.	Cases written off as "dead" all causes in 1941	...	54
5.	No. of "T.B. Plus" cases on Dispensary Register on 31st December, 1941	...	208

The number of "T.B. Plus" cases on the Dispensary Register is higher by nine than in 1940; this again suggests an increase in the number of cases of tuberculosis in the area.

XI.

TREATMENT OF VENEREAL DISEASES.

TABLE XIII.

Lowestoft V.D. Clinic.

Area from which Patients came.	No. of New Cases.		Total number of attendances.		Aggregate number of in-patient days.	
	1941	1940	1941	1940	1941	1940
East Suffolk ...	253	147	2116	2014	—	—
Great Yarmouth ...	37	20	589	818	—	—
Norfolk ...	7	1	12	5	—	—
Total:	297	168	2717	2837	—	—

This year there is a large increase in the number of East Suffolk new cases. The figures for the previous three years are 96, 84, 147. This was to be expected as war brings with it changes of population and an inclination to a changed attitude of mind to life, tending towards recklessness.

TABLE XIV.

Venereal Diseases. (East Suffolk Patients Only).

Centre.	No. of East Suffolk Persons seen for the first time and found to be suffering from:—			Conditions other than Venereal.	Total.	Total No. of Attendances at Out-patient Clinics.	Aggregate No. of In-patient days.
	Syphilis.	Soft Chancre.	Gonorrhoea.				
*Lowestoft	71	—	91	91	253	2116	—
Ipswich	(6) 19	—	(6) 26	(10) 52	97	(1050) 2456	(10) 60
Other Treatment Centres	—	—	—	—	—	—	—
TOTALS	(6) 90	—	(6) 117	(10) 143	350	(1050) 4572	(10) 60

N.B.—The figures in brackets relate to attendances of members of H.M. Forces and are included in all totals.

*I have been unable to obtain the differentiation between civilian and Service patients from this Clinic.

The following figures relate to the number of new cases seen for the first time at the Clinics:—

		1939.	1940.	1941.
Syphilis ...	...	43	68 (24)	90 (6)
Soft Chancre ...	...	1	— —	— (—)
Gonorrhoea ...	...	55	56 (31)	117 (6)
Total ...		99	124 (55)	207 (12)

XII.

CANCER DEATH RATE.

TABLE XV.

Year.	No. of Deaths.			Death Rate per 1,000 Population.			
	Males.	Females.	Total.	Urban.	Rural.	Adminis- trative County.	England and Wales.
1939	202	215	417	2.03	1.95	1.98	—
1940	198	168	366	2.08	1.66	1.83	—
1941	175	209	384	2.3	2.05	2.14	—

The incidence of cancer between males and females has reverted to the usual predominance of female deaths. The rate has once more increased and is higher than ever before. This rate must, however, be considered with reserve. The population is reduced by a large number of young persons, who are most unlikely to die of cancer. The old members of the population who are prone to die from this disease remain in the County so that there is likely to be no reduction in deaths, while the rate is calculated on a smaller population.

XIII.

MENTAL DEFICIENCY ACTS, 1913 to 1918.

TABLE XVI.

Mental Defectives in East Suffolk:

Number on books:—				1940.	1941.
Males	...	...	...	660	677
Females	...	...	...	680	710
Total	...			1,340	1,387

Dealt with by Joint Committee:

In institutions	...	...	...	341
On leave of absence from institutions	...		...	36
Under guardianship	...	...	...	26
Under statutory supervision	...	...	...	145

Dealt with at instance of parent or Suffolk Mental Welfare Association:

In training homes	...	...	...	14
In Royal Eastern Counties Institution	...		...	17
Under voluntary supervision	...	...	...	718

Defectives in Public Assistance Institutions: ... 27 males
63 females

Total	1,387
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XIV.

BLIND PERSONS ACT, 1938.

Total blind persons: 442. 190 males and 252 females. Of these, 406 are unemployable; 15 are employed and 21 come into other categories. 20 blind persons are mentally defective; 11 physically defective; 35 are deaf.

Since the 1st April, 1938, when the County Council decided to relieve the Voluntary Association of the Council's duties, the work was placed within the sphere of the Public Health Department and I was responsible for the administration of the Act. During 1941, owing to circumstances which arose, I found that I was unable to accept further responsibility for this work and I requested that the Public Health Department should be relieved of it—this request was acceded to and since that time the administration of the Act has been in the hands of the Clerk of the Council. The figures included above were received from the Clerk's Department.

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EAST SUFFOLK COUNTY COUNCIL



ANNUAL REPORT

OF THE

County Medical Officer

1941

PUBLIC HEALTH DEPARTMENT,
COUNTY HALL,
IPSWICH